FORM (RF-3)

SUMMARY SHEET

	Change in Company's premium effective 8/8/2009	n or rate level produced b 	by rate revision	
-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
1.	Automobile Liability Private Passenger Commercial			
2	Automobile Physical Damag Private Passenger Commercial			
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass			
5. 6. 7.	Fidelity Surety			
8. 9.	Boiler and Machinery Fire		-	
10. 11.	Extended Coverage Inland Marine			
12. 13.	Homeowners Commercial Multi-Peril			
14. 15.	Other Farmowners Life of Insurance	\$634,199	4.4%	
•	Does filing only apply to certain Classes? If so, specify: No Brief description of filing. (If fil			
	Organization, specify organization): We are increasing FARMPAC® rates as detailed above.			
	Information on the RF-3 is "estimated".			
	*Adjusted to reflect all prior rat **Change in Company's premi rates.		from application of new	
			ny Insurance Company	
	RECEIVED	Roy Behling, State	ne of Company Filings Sr. Analyst Official – Title	

JUL 08 2009

FORM (RF-3)

SUMMARY SHEET

	Change in Company's premius effective 8/8/2009	m or rate level produced b 	y rate revision
-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		-
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	·	
14.	Crop Hail		
15.	Other Farmowners	\$1,985,872	4.3%
	Life of Insurance		
•	Does filing only apply to certa Classes? If so, specify: No	in territory (territories) or o	certain
	Brief description of filing. (If f	iling follows rates of an ac	lvisory
	Organization, specify	· ·	•
	organization):	We are increasing FARM	MPAC® rates as detailed above.
	Information on the RF-3 is "estimate	<u>d".</u>	
	*Adjusted to reflect all prior ra **Change in Company's premates.		from application of new
			nsurance Company
	RECEIVED		ne of Company
			Filings Sr. Analyst
	JUL 0 8 2009	C	Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective NB: 07/13/2009 Ren: 08/18/2009

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or) **
1.	Automobile Liability Private	- Volume (minois)	_ Change (+or-) **
٠.	Passenger		
	Commercial		
2	Automobile Physical Damag	The second secon	
_	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	·	deside access and a second
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$498,283 (exact)	-1.0% (estimate)
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Farm	\$6,643,367 (exact)	+1.0% (estimate)
	Life of Insurance		
*	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No.		
	Brief description of filing. (If find Organization, specify organization):		dvisory duce Amount of Insurance relativities from \$51,000-\$100,000
	for Blanket and Scheduled Farm Personal Property; Revisi		· · · · · · · · · · · · · · · · · · ·
	Custom Insurance Score; revising Incidental Business rule,		· · · · · · · · · · · · · · · · · · ·
	*Adjusted to reflect all prior ra **Change in Company's prem rates.	te changes.	
		Auto-Owner	s Insurance Company
	RECEIVE	Nar	ne of Company
		Jennifer L. Sr	mith, Assistant Manager
			\6:-:-1 T:0

JUL 1 3 2009

Official – Title

SUBSTITUTE FORM (RF-3)

SUMMARY SHEET

Change in rate level produced by rate revisions effective July 13, 2009.

(1)	(2)	(3)
	Annual Premium	Percentage
<u>Coverage</u>	Volume (Illinois) ¹	<u>Change²</u>
15. Other – Mobile Home	\$669,423 (est.)	+6.5% (est.)

This filing applies to mobile home policies in the State of Illinois.

The following is a description of all changes affecting rates with this filing:

- 1. Change the rating algorithm to be fully multiplicative.
- 2. Introduce Insurance Score Rating Tiers.
- 3. Eliminate the maximum discount.
- 4. Eliminate the minimum amount for Personal Property Replacement Cost.
- 5. Change the Solid Fuel Heating Surcharge from 17% with a \$45 minimum to a flat \$150 charge.
- 6. Introduce an Age of construction Surcharge.
- 7. Introduce Earthquake deductible options of 10% and 15% at discounts of 10% and 20%,
- 8. Modify the rating algorithm to apply only Mature and Paid in Full discount Earthquake premium.
 9. Modify territory relativities. JUL 1 4 2009
- 10. Create a new territory 29 and modify the relativities.
- 11. Exclude catastrophic losses from the Paid Loss Surcharge.
- 12. Increase the base rate for an overall 6.0% increase

¹Adjusted to reflect all prior rate changes.

²Change in premium level which will result from application of new rates.

Auto-Owners Insurance Company

Dan Keefe, Administrator – Personal Property Actuarial

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2009, Renewal 9/12/2009

(1)	(2) Annual Premium	(3) Percent
Coverage	 Volume (Illinois) * 	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag	3	
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Commercial Umbrella	\$3,794,304	1.1% (estimate)
Life of Insurance		
Does filing only apply to cer	tain territon, (territories) o	r cortain
Classes? If so,	tain terniory (terniories) of	Collani
•	pplies to all territories.	
specify.	ppilos to un torritorios.	
Brief description of filing. (I	f filing follows rates of an a	advisory
Organization, specify	i iiiiig ionows rates or arr	-a-1.00. j
organization):	Commercial Umbrella rat	e and rule revision.
5.95 26 (15).		
*Adjusted to reflect all prior	rate changes	

Auto-Owners Insurance Company

Name of Company

Jennifer Smith, Assistant Manager, Work Comp, Life and other Liability Actuarial

rates.

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2009, Renewal 9/12/2009

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass	*** *** *** *** *** *** *** *** *** **	
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
).	Extended Coverage		
١.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
1.	Crop Hail		
5.	Other Executive Umbrella	\$1,967,978	10.3% (estimate)
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,		certain
	specify: No, appl	ies to all territories.	
	Brief description of filing. (If for Organization, specify organization):	Executive Umbrella rate a	•
	*Adjusted to reflect all prior ra **Change in Company's premates.		It from application of new

Auto-Owners Insurance Company

Name of Company

Jennifer Smith, Assistant Manager, Work Comp, Life and other Liability Actuarial

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	vel produced by rate revision effective	10-1-2009 NB, 12-1-2009 RB
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners	Management of the state of the	
	Commercial Multi-Peril		
	Crop Hail		
15.	Other Commercial Farm	\$818,460	7.1%
	Line of Insurance		
		erritories) or certain classes? If so, specificates of an advisory organization, specify	
for a	Il coverages except outbuildings, which will go up	p 7%	
	ljusted to reflect all prior rate changes. hange in Company's premium level wh	nich will result from application of new rat	es.
		Cons	olidated Insurance Company
			Name of Company
	RECEI	VED	Scott Edwards
			Official – Title

JUL 1 4 2009

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective <u>10/01/09</u>

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
1.	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		4,000
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
o. 9.	Fire		
9. 10.	Extended Coverage		
11.	Inland Marine		
		-	
12.	Homeowners		40-2
13.	Commercial Multi-Peril		
14.	Crop Hail	01 252 269	13.46%
15.	Other Com. Umbrella Line of Insurance	\$1,252,268	13.4076
	filing only apply to certain territory (to Carrier Umbrella Policies	territories) or certain classes? If	f so, specify:
	description of filing. (If filing follow ing umbrella factors specific to Mo		tion, specify organization):
	djusted to reflect all prior rate change hange in Company's premium level w		n of new rates.
			tern Insurance Company
		Nam	e of Company
		Janel Myer	s - Research Analyst
		Of	ficial - Title

SUMMARY SHEET

	Change in Company's premium or rat	te level produced by rate revision effective	9/1/09
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger	-	
2.	Commercial Automobile Physical Damage Private Passenger		
2	Commercial		
3. 4.	Liability Other Than Auto Burglary and Theft		
4 . 5.	Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	4.	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Commercial Package Line of Insurance	467,157	3.5%
Does :	filing only apply to certain territory (t	erritories) or certain classes? If so, specify:	
Revi		s rates of an advisory organization, specify c cation factors in reference to ISO #: ML-200	

Employers Mutual Casualty Company Name of Company

> Don Coughennower Assistant Vice President Official - Title

^{*} Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

SUMMARY SHEET

	(1)	(2) Annual Premium	9/1/09 (3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Commercial Package Line of Insurance	2,552,883	4.0%
Does f	filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	
Revi		s rates of an advisory organization, specify cation factors in reference to ISO #: ML-20	

* Adjusted to reflect all prior rate changes.

Illinois EMCASCO Insurance Company

Name of Company

Don Coughennower
Assistant Vice President
Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	vel produced by rate revision effective	10-1-2009 NB, 12-1-2009 RB
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
11. 12. 13. 14. 15.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Commercial Farm Line of Insurance	\$601,972 erritories) or certain classes? If so, specify:	7.1% All territories.
for a	all coverages except outbuildings, which will go under the second of the	· · · · · · · · · · · · · · · · · · ·	
		Indiana Na	a Insurance Company ame of Company Scott Edwards
			Official – Title

RECEIVED

JUL 1 4 2009

FORM (RF-3)

SUMMARY SHEET

Change in Company's premiun	n or rate leve	I produced by i	ate revision
effective 09/01/2009			

	(4)	(0)	(0)
-	(1)	(2)	(3)
-	0	Annual Premium	Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
_	Commercial	·····	
2	Automobile Physical Damag		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	See other	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other CMP-Non-Liability	4,684	-1.2%
	Life of Insurance	.,,,,	11.270
•	2 0		
	Does filing only apply to cert	ain territory (territories) o	r certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If	filing follows rates of an a	advisory
	Organization, specify		
	organization):	We are filing to adopt	ISO reference CF-2009-RPTLC
	and CF-2009-OPTRU.		
	*Adjusted to reflect all prior r	rate changes.	
	**Change in Company's prei	mium level which will resu	ult from application of new
	rates.		
		North River Insura	ance Company
		.	

Name of Company Sharon D. Smith, Regulatory Compliance Analyst

SUBSTITUTE FORM (RF-3)

SUMMARY SHEET

Change in rate level produced by rate revisions effective July 13, 2009.

(1)	(2)	(3)	
	Annual Premium	Percentage	
<u>Coverage</u>	Volume (Illinois) ¹	<u>Change²</u>	
15. Other – Mobile Home	\$336,395 (est.)	+5.0% (est.)	

This filing applies to mobile home policies in the State of Illinois.

The following is a description of all changes affecting rates with this filing:

- 1. Change the rating algorithm to be fully multiplicative.
- 2. Introduce Insurance Score Rating Tiers.
- 3. Eliminate the maximum discount.
- 4. Eliminate the minimum amount for Personal Property Replacement Cost.
- 5. Change the Solid Fuel Heating Surcharge from 17% with a \$45 minimum to a flat \$150 charge.
- 6. Introduce an Age of construction Surcharge.
- 7. Introduce Earthquake deductible options of 10% and 15% at discounts of 10% and 20%, respectively and revise Earthquake rates.
- 8. Modify the rating algorithm to apply only Mature and Paid in Full discounts to Earthquake premium.
- 9. Modify territory relativities.
- 10. Create a new territory 29 and modify the relativities.
- 11. Exclude catastrophic losses from the Paid Loss Surcharge.
- 12. Increase the base rate for an overall 6.0% increase



²Change in premium level which will result from application of new rates. 14 2009

Owners Insurance Company

STATE OF ILLINOIS DEPARTMENT OF INSURANCE

Dan Keefe, Administrator – Personal Property Actuarial

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2009, Renewal 9/12/2009

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private		- Grango (101)
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Commercial Umbrella	£4 400 040	0.00/ (tit-)
Life of Insurance	\$1,480,818	-0.9% (estimate)
Does filing only apply to cer Classes? If so, specify: No, ap	tain territory (territories) or	r certain
Brief description of filing. (If Organization, specify	filing follows rates of an a	advisory
organization):	Commercial Umbrella rati	e and rule revision
organization).	Commercial Officiella fati	e and full fevialoff.
	<u> </u>	
*Adjusted to reflect all prior		

Owners Insurance Company

Name of Company

Jennifer Smith, Assistant Manager, Work Comp, Life and Other Liability Actuarial

rates.

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective NB: 07/13/2009 Ren: 08/18/2009 .

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private	-	
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		•
5.	Glass		
6.	Fidelity		
7.	Surety		<u> </u>
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		**************************************
13.	Commercial Multi-Peril	•	
14.	Crop Hail		
15.	Other Farm	\$366,725 (exact)	-3.5% (estimate)
	Life of Insurance		
*	Does filing only apply to certa	ain territory (territories) or	certain
	Classes? If so,	in ternory (territories) or	certain
	specify: No.		
	Brief description of filing. (If f	iling follows rates of an ag	dvisory
	Organization, specify	mily renews raises or arr a	av.55. y
	organization):	Introduce Custom Insurance	e Score; Introduce Amount of Insurance
	relativities from \$51,000-\$100,000 for Blan	ket and Scheduled Farm Personal P	roperty; revising incidental Business rule,
	Recreational Vehicle Liability rules, Farm F	Plus rule, Replacement Cost rule; Ch	anging Earthquake coverage
	*Adjusted to reflect all prior ra	ate changes.	
	**Change in Company's prem		t from application of new
	rates.		
		Owners I	nsurance Company
		Nar	me of Company
	RECEIVE	Jennifer L. S	mith, Assistant Manager
			Official – Title

JUL 1 3 2009

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2009, Renewal 9/12/2009_____.

(1) Coverage	(2) Annual Prem Volume (Illino	
Automobile Liability		-
Passenger		
Commercial		
Automobile Physica	l Damag	
Private Passenger		•
Commercial		
Liability Other Than	Auto	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machiner	у	
Fire		·
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Pe	eril	
Crop Hail		
Other Executive Umbrella	\$499,849	10.8% (estimate)
Life of Insur	ance	
Does filing only app Classes? If so,	ly to certain territory (territo	ories) or certain
specify:	No, applies to all territories.	
Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Executive Umbrella rate and rule revision.		
	all prior rate changes. any's premium level which w	will result from application of new

Owners Insurance Company

Name of Company

Jennifer Smith, Assistant Manager, Work Comp, Life and Other Liability Actuarial

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _			10-1-2009 NB, 12-1-2009 RB		
	(1) <u>Coverage</u>	(2 Annual F <u>Volume (</u>	remium		(3) Percent Change (+ or -)**
11. 12.	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril				
	Other Commercial Farm Line of Insurance	\$269	.091		7.1%
 Brie	es filing only apply to certain territory (territory) ef description of filing. (If filing follows rough coverages except outbuildings, which will go up	ates of an advisory			ion):Increase LCMs by 3%
	ljusted to reflect all prior rate changes. hange in Company's premium level wh		pplication of new ra	tes.	
	RECEIV	ED	Pe	Name of C	wards
	WE -			Official -	- HILE

JUL 1 4 2009

FORM (RF-3)

SUMMARY SHEET

Change in Company's p	remium or i	rate level	produced by	rate revision
effective 08/01/2009		•		

			
_	(1)	(2)	(3)
	` ,	Annual Premium	Percent
-	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	1,041,486	-0.5%
	Commercial		
2	Automobile Physical Damag		
	Private Passenger	916,318	-0.5%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		•
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	1,230,481	-0.5%
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other & Umbrella	138,779	0.0%
	Life of Insurance		
•	Does filing only apply to certai Classes? If so, specify: N/A	n territory (territories) or	certain
			· · · · · · · · · · · · · · · · · · ·
	Brief description of filing. (If fil	ing follows rates of an ac	dvisory
	Organization, specify		
	organization):		ate stabilization factor to reduce
	large premium changes for policyho	lders.	
	*Adjusted to reflect all pring set	o changes	
	*Adjusted to reflect all prior rat **Change in Company's premi		t from application of new
	rates.	atti ievei wilicii wili iesal	t nom application of new
		SECURA Supreme	Insurance Company
			ne of Company
			President, General Counsel

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	8/1/09 New and 10/1/09 Renewal	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>RDP</u>	57,175,761	19.8%
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, speci	fy: <u>No</u>
revised; Form 1 is eliminated; Medical	vs rates of an advisory organization, spe I Payments Limits, introducing \$10,000	cify organization): <u>Basic Premiums are</u> option and changing \$4,000 option to
renewals only.	1 110	
- 100-tal ah	lettina Droarant	
10.11161 0100	1001 Dail	
*Adjusted to reflect all prior rate changes	\mathcal{I}	
**Change in Company's premium level w	s. which will result from application of new rat	200
Change in Company's premium level w	which will result from application of flew rat	.63.
	State Farn	n Fire and Casualty Company
	- Julie Fall	Name of Company
	Karen Terry, A	ssistant Vice President & Actuary
RECEIVE	U	Official – Title

JUL 0 2 2009

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	9-1-2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		RECEIVED
6. Fidelity		
7. Surety		
8. Boiler and Machinery		UN_1 '0_000
9. Fire		JUN 1 9 2009
10. Extended Coverage		
11. Inland Marine		STATE OF ILLINOIS
12. Homeowners		DEPARTMENT OF INSURANCE
13. Commercial Multi-Peril		SPRINGFIELD
14. Crop Hail		7.00/
15. Other <u>Architects & Engineers</u> Line of Insurance	992,194	7.0%
Does filing only apply to certain territory	(territories) or certain classes? If so, spec	ify: <u>No.</u>
Zurich is filing for a rate change new policies and October 1, 20	rates of an advisory organization, specify to our Architects & Engineers program to 09 for renewal policies. The overall impole 1/2007 through 6/30/2008 with the propose	to be effective September 1, 2009 for act of this filing was calculated by re-
*Adjusted to reflect all prior rate change: **Change in Company's premium level v	which will result from application of new ra	
	Zurich Al	merican Insurance Company Name of Company
	hlenise	Source /Assistant Secretary